

## **The Case for a Recovery Blueprint: Achieving Well Being through Convergence, Collective Action and Collective Impact: Community, Government, Post Secondary and Private Sector Alignment**

The 40 years prior to the pandemic was far from a “golden age of shared prosperity in North America” and it was more like the “Gilded Age” of the late 19<sup>th</sup> Century.

In March 2020, when COVID-19 changed lives across the globe, Nova Scotia – and many other societies -- were faced with puzzles policymakers were unable to solve like child poverty, systemic racism, wage disparity, food insecurity, unequal access to housing, addictions, and mental health challenges. The political system was treating the symptoms at great cost, but not the underlying cause. The limits of government’s ability, on its own, to solve complex challenges with funding announcements and government run programs should be clear by now.

Despite past policy pronouncements about eradicating poverty, hunger, or homelessness, and notwithstanding commitments to reconciliation, elimination of racism and achievement of equity, diversity and inclusion, these challenges seemed to get worse under the old paradigm, or at the very least did not improve.

As each new crisis emerged over this period, from the opioid epidemic-- a crisis of despair-- the mental health crisis, the housing crisis, to the child poverty crisis and others, the inability of the existing paradigms and systems to effectively respond became more and more apparent.

Then, along came the COVID-19 pandemic. Will it be a catalyst for dramatic change, even a paradigm shift?

## **Culture, Economics, Politics, and Society: the I-we-I cycle in North America**

In his text *The Moral Consequences of Economic Growth* (2005) Economist Benjamin Friedman, former chair of the Department of Economics at Harvard University, makes the case that incomes on the rise lead to more open and democratic societies. Using economic data, he correlates social upheaval with economic decline and more tolerance and social cohesion with times of broadly shared economic growth.

The major exception to his thesis is the Great Depression. He titled his chapter on the Great Depression "*Great depression, Great exception*" and commences with the following FDR quote:

"Change is the order of the day... Economic problems, long in the making, have brought crisis of many kinds, for which the masters of old practice and theory were unprepared...*Social justice, no longer a distant ideal, has become a definite goal*" (p.158)

He attributes this exception to the broad scale of change and the strong leadership and forward thinking in public policy experimentation of the New Deal Era.

Friedman concludes that the depression did not conform to his general thesis that connects rising prosperity to openness, tolerance, and democracy. He explains it as follows:

"Perhaps the best explanation, though, is that the socially corrosive power of more ordinary economic distress is overwhelmed by still stronger forces of a different kind if the distress is so great as to constitute an out and out crisis...People pull together when they see their very lives threatened and the entire social and political structure in which they live thrown into imminent danger... in times of great uncertainty people have a tendency to think that, whatever is happening, they are in it together." (p.178)

Although Friedman's analysis pertains specifically to the depression, it may also provide insights into the Covid crisis and how best to approach recovery.

In a recent book, Harvard Sociologist Robert Putnam, author of *Bowling Alone*, along with Co-author Shaylyn Romney Grant undertook a 125-year review of shifts in societal values discernable from the data which depicts what he calls the “I-We- I curve” which shows a remarkable shift in culture and values in America from the Gilded Age (“Individualistic” values) through the Progressive Era (“Collective values”) to the immediate pre-pandemic period, what can certainly be called a New Gilded Age (“Individualistic values”).

In *The Upswing: How America Came Together a Century Ago and How We Can Do It Again* Putnam and Grant show through compelling data analysis that between 1895 and 2020, in culture, society and politics America went from “‘me’ to ‘we’ and then back to ‘me’.”

With extensive data assessment ranging from registered children’s names to Ngrams (Google analytics of use of specific words in publications) to tax policies they show how the “progressive era” led to a dramatic shift from individual to collective values which led to prevalent communitarian thinking and worldviews that then reversed sharply in the 1960s and have now reverted to the levels of inequality and individualism not seen since the “gilded age”.

Importantly for this analysis, they conclude the progressive era shift was the result *a grass roots, community led movement* that, over time, changed social norms and, with some important qualifications, led to a higher degree of collective community action and corresponding well being.

Although much richer in use of data analytics, the Putnam and Grant analysis in *Upswing* bears some comparison to a hypothesis developed by Albert O. Hirschman (who I referred to earlier for his theories on economic development) in his 1982 book *Shifting Involvements: Private Interest and Public Action* where he asked if societies are predisposed to oscillations between periods of intense preoccupation with public issues and then almost total preoccupation with private interest and individual self improvement.

Known as the Hirschman Cycle, the theory is that since the Industrial Revolution American society has regularly shifted between focus on private interest and public action.

Jane Jacobs, in her book *Dark Age Ahead* (2002) attributed such shifts to “beneficent pendulums”; when society becomes concerned about swinging too far towards inequality, there is a self correction that swings the pendulum back. However, the risk of adopting a machine-like pendulum theory is that it implies the shift will be automatic once a certain tipping point is reached. What may be more “beneficent” is an intentional, community driven and system dynamics perspective that could lead to a paradigm shift.

### **From a “mechanical view” to a “systems view”: A unifying approach for new coalitions and new collaborations**

In the text *The Systems View of Life: A Unifying Vision* the authors highlight the link between crisis and change in systems thinking. They observed, “...the tension between crisis and transformation is central to the formation of complex systems”. They noted how organizational crisis manifests itself as a breakdown of the existing systemic balance and at the same time represents a transition to a new state of balance.

Applying this way of thinking (and the analysis of Rajan, Stiglitz, Shafik and Drucker) the equilibrium among government, the private sector and community has broken down and we could be at the beginning of a transition to a new equilibrium and perhaps a re-balancing or even convergence among the three pillars of society.

Paradigm shifts become possible when there is system disequilibrium and a broad enough view to see that certain societal puzzles are not solvable within the existing paradigm. In short, the Covid 19 pandemic has triggered a period of crisis that may only be resolved when a new paradigm emerges, one that reflects the values of the broader community.

Not only are certain of the largest problems faced by society not likely to be solved within the current systems in the existing paradigm, but many are also made worse by it. Our current problems like poverty, climate change, biodiversity loss, inequity and exclusion, and the adverse mental and physical health impacts of living in society are mutually reinforcing, so our solutions need to be so as well.

Integrated systemic problems require integrated multisectoral, multisystem solutions.

A paradigm shift can be achieved through immense collaboration: a process of change over several years built on a systems approach that taps into the latent power of collective action, the ability to take new ideas from inception to impact, and the formation of new coalitions to achieve a common vision and goals. Done well, this could foster complimentary strategies and approaches, a more equitable sharing of resources, and sustained and coordinated efforts.

Nova Scotia has an advantage in that its citizens, organizations and institutions have already demonstrated an ability to pursue collective action most recently in responding to Covid-19 and before that in response to the 2014 Ivany Report. Building on that capacity, Nova Scotians may be in a better position than most in building a truly nonpartisan collaborative movement, joining issue specific efforts into a compelling system wide and citizen driven effort to call for large scale reform and a new social contract for Nova Scotians.

At great risk of oversimplification, a systems approach could borrow heavily from the earlier ONE Nova Scotia model and be built around:

1. An urgent call for collective action across the key pillars of Nova Scotian society; Government, Post Secondary Institutions, the Private Sector, and the Community Sector. This “urgent call” can be initiated in many ways. The Auditor General’s suggestion of a Blueprint for Recovery could be a place to start or other ways to catalyze collective action may emerge as the next phase of the pandemic reveals itself.
2. The establishment of a shared vision—across sectors and regions-- and a limited number of stretch goals could be agreed upon to be achieved within 10 years, as they were through the One Nova Scotia process.
3. A sustained, collaborative, systematic, and mutually reinforcing approach to achievement of these new goals, catalyzed by the community sector, post secondary institutions, the private sector and government, and built on collaboration across all key communities and institutions.

As we emerge from the Covid-19 pandemic, there is an opportunity to begin a sustained and coordinated effort to build a new narrative which will bring currently siloed efforts together in broader vision for the future of Nova Scotia. This presents an opportunity for the community sector to take a seat at the table with an initiating role in activating community conversations about the Recovery Blueprint.

If the more structured approach of a Recovery Blueprint is to be followed, through a cooperative approach, a consensus could be sought among Community Sector and Post Secondary leadership to initiate such an approach. Government would likely have an interest in being seen to be responding to the call from the Auditor General and collaborating to address complex problems like population health.

This could be built into the community sector's government relations strategy discussed below. A Covid-19 Recovery Relationship Accord among sectors could establish shared goals and principles. This could be proposed as a preliminary step to initiate the work called for in a mobilizing report, for example *Now More than Ever: An Urgent Call for a New Social Contract for Nova Scotians*.

### **Civic Universities and Community Colleges: The Role of Post Secondary Institutions in the Covid-19 Recovery Blueprint**

In a recent article entitled, *Build Back Better: the Role of Post Secondary Institutions in Supporting Community Resilience Post Covid-19*, the McConnell Foundation reported on a consultation it conducted with nine Universities across Canada. Noting the pandemic highlighted the need for increased social, economic, and environmental resilience, they note:

“The effort will require the participation across society, and post-secondary institutions are uniquely positioned to play an outsized role. In their role as community anchors, they possess unique assets and resources (educational, research, financial, relational and physical) which can be used for greater impact and prepare us for a better future.

Against the backdrop, university and college presidents are expressing a strong desire to lean into this enhanced community building role. This requires working across sectors, deeper community engagement and dialogue, and more investment in building relationships of reciprocity and trust.” (McConnell Foundation, 2022)

In Nova Scotia, University and College Presidents have demonstrated a commitment to community and building multi sectoral relationships for at least the last decade. Ray Ivany, while President of Acadia University led the One Nova Scotia Commission; Kent MacDonald, as President of St Francis Xavier University led the One Nova Scotia Coalition and now Don Bureaux, President of the Nova Scotia Community College leads the One Nova Scotia Collective.

Dalhousie University under the leadership of Deep Saini has published a new strategic plan that includes a commitment to community service with the following commitment to “impactful community engagement”:

“We exist because of support from our communities. In turn, Dalhousie has an ongoing responsibility to engage, connect with, and support our communities. We are committed to being a strategic partner in promoting the economic development and social vitality of Nova Scotia and the Atlantic provinces through our actions, including creating and fostering growth opportunities through impactful and collaborative research, scholarship, and partnerships. *Befitting a civic university, these obligations extend to fostering the capacity to overcome structural challenges by reducing disparities the region has endured within Canada.* Dalhousie will play a critical role in that journey as a citizen of Nova Scotia with an ongoing responsibility to engage, connect with, and support the local communities not as an elite institution separate from the daily affairs of our public, but as a member of our public.”

The commitment to act as a “civic university” has meaning. Being a civic university involves moving beyond the question of what is a university or college good at, to what are they good for? How do they benefit society?

Somewhat like the concept of “trickle down” economics, there has been a similar faith in the Academic world of something comparable to market forces, or at

least, an “invisible hand”, that results in curiosity driven research and knowledge created at the frontier of knowledge being inherently good because, in the end, it will be diffused and will bring benefits to society.

Creating and disseminating knowledge, in other words focusing on what the University is good at is, for some, both the beginning and end for a civic university. As was written in 2016 in *The Civic University, Policy and Leadership Challenges*:

There are...grand challenges facing global society: global warming, loss of biodiversity, pandemics, poverty, war, fundamentalism, --it is a long list. On a different scale but equally real are problems faced by local communities... Such questions require knowledge; not just the application of existing knowledge, which is often trapped within disciplinary silos, but the creation of new knowledge in response to a particular societal issue.”

A civic university is one that puts academic and research excellence to work in responding to the needs of its community. This requires a strong connection to community and a commitment to promote the public good through civic engagement.

Universities and the Nova Scotia Community college have features that clearly align them with the “civic institution” concept. Historically, both the Antigonish Movement emerging from St FX U and the statutory mission and work of the Nova Scotia Community College to enhance the economic and social well-being of the province are good examples of activities of civic institutions. Dalhousie’s recent strategic plan builds on a decade of contributing to the economic well being of Nova Scotia through cross sectoral collaborative efforts like Volta Labs, the Emera IDEA hub, and Creative Destruction Labs.

The work needed to build resilience as we emerge from the pandemic presents an opportunity to build on these foundations and have the community sector and the post secondary sector work together with government and the private sector to develop and begin to implement a recovery plan for Nova Scotia. Engagement with the PSE sector through the Presidents of NSCC, Dalhousie and the leadership of CONSUP could be part of the forward plan for Nova Scotia.



## **Crisis and Community: The Case for a Community Catalyzed Recovery Blueprint**

The Covid crisis has highlighted others—homelessness, mental health, despair, racism, failing healthcare systems, child poverty-- and will be followed by even more, especially as climate change triggered extreme weather events accelerate.

Why are some communities resilient in the face of crisis while others are not able to effectively respond or recover?

Researchers have studied this very issue. In *Disasters and Community Resilience: Spanish flu and the Formation of Retail Cooperatives in Norway*, researchers Hayagreeva Rao and Heinrich Greve felt there was an absence of research informed explanations for the adaptive capacity of communities -- their ability to bounce back to pre-disaster levels, or to do better—following a crisis. They set out to fill this gap with a 2018 study of Norway’s community response to the Spanish flu epidemic of 1918-19.

In considering community resilience, that they observed there are two requirements needed to assess resilience: (1) Exposure to a threat or an adverse event and (2) the achievement of a positive adaptation.

In considering the case of Norway and the Spanish Flu they concluded that *pre-existing civic capacity* “are the wellsprings of resilience in communities.” They state:

“An important reason why resilient communities adapt to disasters better than their less resilient counterparts is that a ***diverse nonprofit sector*** leaves the community with significant civic capacity, including experienced founders and workers, dense social connections, and trust of others.”  
(emphasis added)

In concluding that sociable communities are more likely to help themselves and be resilient, and that organizational diversity matters and provides additional security to communities, the authors concluded:

“... epidemics of contagious disease have long lasting effects on the organizational vitality of communities. This means the ***policy response to a***

***pandemic should be broadened to include support for funding new organizations...***

Policy planners should also ***consider how a pandemic impairs the social infrastructure of a community over the long term and undertake initiatives to foster the building of community organizations.*** After all, it is the sociable communities that survive disasters by helping themselves, investments in enhancing the social infrastructure of communities too merit consideration.”  
(Emphasis added)

To be resilient is to be vitally prepared for adversity. Adversity requires improvement in levels of collaboration and overall community capability —the capacity to learn, collaborate and act – without knowing in advance what communities will be called to act upon.

A crisis will challenge the status quo, and a region or a community’s response to crisis can create opportunities for learning and lead to new levels of collaboration, institutional configurations, and networks to change existing systems. Researchers have theorized that community cohesion in response to past crisis will favour those communities with an institutional legacy that has experience with collective, civic action.

Like Norway, Nova Scotia has a unique history and culture that favours community and cooperative responses to challenges. The 1920s were a particularly dire time for Nova Scotians with outmigration and shrinking GDP. In the face of adversity, a community led responses emerged in the northern part of the province. The Antigonish movement emerged at a transitional point in human history, like now.

The Antigonish Movement is an example of a community led model of socio-economic reform -- a third way between the extremes of capitalism and statist rule of the economy.

The experience of a community in handling a crisis can be seen as the test of cohesion that verifies community support of community organizations or proves its absence.

One of the strengths of community organizations is their role in developing and demonstrating alternatives to the *status quo*. They create ways for people to

participate in the development of social change in ways not possible through government structures.

In being “not-business” and “not-government”, community impact organizations create space where it is possible to think about social change that is not likely or even possible in a process led by business or government. In this sense, community impact organizations can serve as institutional bridges that mediate a variety of relationships. For this reason, there is a compelling case for having the community sector take an initiating role in the post Covid pandemic recovery in Nova Scotia.

### **Aligning Priorities with Government: Going to Where the Public Policy Energy Is**

A key part of any Government Relations Strategy is to have something to say about the things Government is interested in. Nothing interests the senior levels of government more than the things that interest the Premier.

It is reasonably well known that the first two years of a new government’s mandate is when they have the broadest scope for change and accomplishment. This is the time when the poetry of the campaign must become the prose of governing. In Nova Scotia, ambitious plans have been articulated by the new government intent on finding solutions to pressing problems, while faced with the challenge of implementing and governing during a pandemic. A Recovery Blueprint initiative might be well received if the collaborative response is credibly presented as part of a solution to the most pressing problems currently facing the Government of Nova Scotia.

It is also in the early stages of governing when governments come to understand the challenges from the outside looking in have a different level of complexity when you are on the inside, looking out.

There are several elements of the government’s key platform commitments which can become well aligned with the collaborative, systems based, ONE Nova Scotia type approach to developing a Covid 19 recovery plan.

## Healthcare and Well Being

The Nova Scotia Government was elected based on a strong commitment to “fix” health care including improved access to primary health care providers, addressing surgical wait times, recruitment, and retention, address chronic illness and improving administration.

Many Nova Scotia governments have foundered on the shores of a promise to “fix health care”. It was a key priority of Dr. John Savage, Dr. John Hamm, Dr Ron Stewart—all knowledgeable and proficient healthcare practitioners who set out with a goal of fixing healthcare. It was also a focus of Premier Darrell Dexter and his Minister of Health, Maureen MacDonald. It is a not very well-kept secret that Premier’s in Canada would often appoint their most threatening rival within their party to the post of Health Minister as an assurance they would not be a political threat to the Premier.

The only government in recent memory that did not make fixing health care a key priority was Premier Stephen MacNeil, and, after his retirement, the liberal government lost on a campaign largely fought over healthcare.

Across Canada, fixing “healthcare” has been an overriding priority of health Minister’s for over 20 years. Federal commissions like the 2002 *Romanow Commission on the Future of Healthcare* (which made 47 recommendations, the vast majority of which spoke to financing the existing system and recruiting more health human resources into the existing system). The absence of a call for a social determinants approach to improved health was noteworthy for its absence. Governments of all stripes have attempted to fix the system without fundamentally changing the system.

No provincial government in Canada has yet chose to lead a fundamental shift from a siloed, mechanistic view of health as the treatment of malfunctioning health in various specific parts of human bodies and minds, to a holistic, integrative systems view which recognizes that good health is not just healthcare and it isn’t merely the treatment of disease and trauma, but a subjective experience,— a state of well-being,— which is achieved in different ways than our current system is designed to work.

Notwithstanding decades of political leaders committing to fix healthcare most have paid lip service to the social determinants of health and very few have systematically increased upstream investments to improve community and individual health.

The opportunity exists for the current government to be the first to in Canada to clearly show that investing in community is akin to investing in health care. Funding for the community sector, from equity and anti-racism, affordable housing, food security, education, community transportation, bridging the digital divide, early learning, and childcare to social and physical infrastructure, can improve health outcomes and reduce the need for future spending in health care. Given our favourable demographic changes, it is probably one of the rare times where fiscal resources will be growing in the near term and new funds for investment are likely to be available.

Among the platform commitments on health was the word “prevention” with campaign commitments for fitness in schools, healthy eating, and cooking, reducing cost of healthy food and giving tax credits for children participating in sports or arts.

Since taking office in September, the government immediately conducted a listening tour of the health care system in Nova Scotia and made the following important observations:

Social determinants of health refer to the social and economic factors that impact an individual’s health. Within the context of the tour, participants expressed the sentiment that Nova Scotia’s healthcare system is built to support sick people, rather than to keep them healthy. This expression underscored the importance of proactive investments in social programs that will alleviate pressures in the health system by addressing the root causes of poor health outcomes.

In describing these issues, participants advocated for greater investments in housing, food security, and living wages. Participants felt this could be supported through intentional work with advocacy organizations (such as

housing organizations), through greater education (such as food nutrition) and through legislative action (such as raising the minimum wage).

“We need to do more preventative work. The system is flooded with unhealthy people; this can be more efficiently addressed if *we invest in the social determinants of health like housing and food security*. We can’t unlink this from the context of primary health.” (emphasis added)

The findings from the listening tour conducted in late 2021 opens a new possibility for collaboration between government, the community sector, and others. Getting a functioning healthcare system to treat injuries and disease is important, but it is only a small part of the health story. Medical procedures and healthcare systems for treatment are not directed at promoting and maintaining good individual and community health. Moving upstream to the social determinants of health will have much greater long-term impact. This is a leverage point for the community sector and an important point for alignment and multi sector collaboration among government, the community, and post-secondary sectors.

The observation made by government about the social determinant of health is significant because it shows awareness of the *conceptual problem* at the center of contemporary health care---the confusion between the disease process and disease origins. Without detracting from government’s efforts to improve access for treatment of disease, a systemic, whole person approach to improving health through the social determinants of good health can *complement* the work being done by government and make the mechanistic, treatment oriented and responsive but reactive health care system work more effectively.

Individual health has different dimensions-- *treatment of disease* and the *subjective experience of well-being*: both are needed.

A systems view of good health should promote both healthy parts of organisms at the biological and cellular level—hearts, hips, knees, kidneys, eyes, ears, gastro-intestinal systems etc.-- (which is the main focus of the existing healthcare system), and the well-being of the whole organism, which is what a well-being approach catalyzed by community would foster. This is achieved at the level of the social communities and natural environment of the organism.

A systemic approach to address the social determinants of health catalyzed by the community sector could broaden the scope of “health and wellness” from the treatment focused, biomedical level of cells and organs, interventions and treatments for specific disease and illness, (as well as needed health human resources, buildings and equipment required for treatment) to the broader social system and societal commitments, including all of the things that contribute to a healthy body and mind for *all* Nova Scotians, including the interactions needed with the natural environment and the social connections which are known to improve well-being.

It is likely that the only thing that will “fix” healthcare is a paradigm change where *well-being* becomes a central focus of policy. The community sector can be a partner in fixing health care by doing some of the long-term work to measurably improve progress on the social determinants of health on a parallel path while government works to invest in the health care system needed when individual health and wellness is not sustained.

By addressing the social determinant of good health, combined with needed investments in the healthcare system by government, the community sector can support a longer-term solution to health system challenges

The community sector has a near-term opportunity to contribute to this additive “social determinant” perspective to advance the government’s expressed desire to fix healthcare. This change will be hard to advance solely from within the system itself due to the short-term nature of electoral cycles, the focus of existing work on mechanistic operation of the system, and vested interests tied to the status quo, financial power, and political will.

Such an approach does not have to be a direct challenge to the existing healthcare/disease treatment system, but a complimentary and parallel process fostered at the community level to create alignment and mutually reinforcing objectives with government objectives. A recovery blueprint for Nova Scotia could start with the evidenced based premise that good public health policy is also good economic and fiscal policy.

On February 15, 2022, the Canadian Council of Chief Medical Officers of Health released a statement that emphasized the need for resilience and a collaborative

focus on the social determinants of health at this point in the pandemic as we start recovery efforts. Their joint statement is a significant guide for post Covid-19 pandemic policy. They included a call for “supporting communities to shape decisions and lead tailored solutions.” They stated:

“We want to move forward with hope and resilience. Through our recovery efforts, we must learn about and address the many broader health consequences and the impacts of interrupted health care, public health and social program delivery, which have occurred over the last two years. The pandemic has revealed and amplified deeply entrenched health, social, and economic inequities that exist in Canada – and we can see, more than ever before, the *interaction of the social determinants of health in shaping negative health outcomes and driving health inequities.*

This pandemic has highlighted the need to take action as individuals and *as a community to improve our health and wellbeing to make us collectively a healthier and more resilient society.* As part of these efforts, public health officials will continue to work on improving *inter-sectoral collaboration to strengthen social and economic policies that protect health, prevent disease, and build resilience.*

The reality is that COVID-19 will be with us for the foreseeable future and there will continue to be new and important roles for public health to play. A strong and resilient public health system is Canada’s best defense against future public health threats. Building the capacity of our health care systems to ensure enhanced surge capacity for future crises is equally important. *Strengthening the interconnectivity of these systems and continuing to strive for a cohesive approach in our response to future crises will also remain a priority.*” (emphasis added)

For many decades environment and economy, social spending on public health, community and fiscal goals were often analyzed as polarities. The existential threat of climate change, and the cultural dynamics of inequality and now recovery and resilience following the global pandemic, among other factors, are resulting in sectoral goal convergence among the private, the community and government sectors that call for multi sectoral collaboration. It is becoming clear investment in environmental protection and social spending on public health and



community development are mutually reinforcing and contribute to strong fiscal and economic outcomes.

## **Population**

Government has articulated a goal to have a population of 2,000,000 by 2060.

Government is wisely focused on population growth as an economic development tool. Many of the policies required to achieve population growth in a mobile society are policies that improve quality of life at the community level.

This is part of a virtuous circle because social development with an objective of increased population will expand the economy. This topic is reviewed in detail elsewhere in this paper. With increased mobility and proximity optional work forces, the strength and resilience of communities supported by place-based policy will intersect with economic development. Community collaboration to achieve population goals will align well with government's ambition for population growth.

## **Housing**

Although not a platform commitment, housing emerged early in the current government's mandate as a priority. Traditional market mechanisms have failed to address supply-demand imbalance and the impact on well-being is becoming clear. Governments have for many decades left housing to the market and there is a clear consensus among economists that rent control alone will not resolve the challenge.

There may be perception that only the private sector can solve the supply-demand imbalance and a critical current issue is to speed up municipal approvals, create subsidies and direct incentives for developers to include affordable housing in their private projects. There is also a policy and political interest in increasing the supply of tradespeople needed to speed up construction.

The community sector is not currently seen among the solutions as focus is on reducing barriers to private housing development. However, if the community

sector were able to develop viable solutions, they would likely have the attention of government. By intentionally aligning the efforts of community sector organizations with a mandate for housing to the government's strategy on housing, the role of the community sector could be better aligned with government's policy goals.

### **Becoming a World Leader in the Green Economy**

Thinking differently about goals of public policy opens new ways of seeing the interdependence of a well-being based, systems view of government, with the government, the private sector and the community sector working together, restoring equilibrium to society.

The world is now amid another significant industrial shift or a Fifth Industrial Revolution: and a significant focus of the shift will be the greening of the economy. This shift will involve a massive global redirection of capital, resources, energy knowledge development, and technology. This shift is variously referred to in "shorthand" to be the shift to the "green economy" or the "digital economy. In its platform commitments, the current government staked out a goal to be a world leader in the green economy.

There has been a sea change in the convergence of economy, environment and well-being among all sectors and a corresponding convergence of government, community and the private sector objectives are at an early stage. This shift is evident from corporate commitments to Environment, Social and Governance (ESG) goals and Equity Diversity and Inclusion (EDI), the rise of the purpose driven organization, social entrepreneurship, and the increasing recognition of the interdependence of our systems. This convergence will likely be accelerated as we deal with the challenges of living with Covid, respond to the changing nature of work, the rise of the digital economy and continually changing communications technology.

Interconnected systems mean when we speak of making health and well-being the primary goal of public policy, it is the three interdependent levels of health and well-being: individual, social, and *ecological*.

So, how does this link to the Nova Scotia government's strategy?

Being a "world leader in the Green Economy" means moving beyond old industrial age paradigms. On November 5, 2021, the Legislature passed the *Environmental Goals and Climate Change Reduction Act*, a very progressive Act that enshrines and recognizes the interdependence of individual, social and ecological well-being.

The Act expressly enshrines as a goal the *well-being of the individual and the community* by achieving adequate standards of community nutrition and economic well-being without jeopardizing the integrity, diversity, or productivity of the environment.

The Act also states that with respect to diversity, equity, and inclusion, it is the government's goal to advance on-going work to create *sustained funding for climate action and community-based solutions* with racialized and marginalized communities in Nova Scotia.

These statutory commitments passed by the Legislature in late 2021 present new opportunities for alignment of the private, government and community sectors.

In summary, a basic principle of government relations is to find areas where the interests of government and the interest of the organizations interacting with government align. As Nova Scotia emerges from the Covid-19 pandemic a multi sector collaboration on a recovery blueprint could build on existing areas of alignment and bring the force multiplying effect of collaboration to these platform commitments and government goals. Particularly now with the government focussed on healthcare, housing, homelessness mental health, sustainable prosperity and leading in the green economy there may not be a better time to position the community sector as a key partner to achieve a new public policy vision.

The focus of discussions with government could shift away from a focus on the "needs" of the sector, towards the needs of society that can be met with a

thriving community sector. This alignment opens the way for a discussion with government about a collaborative process for developing a recovery blueprint. This is what is intended by the phrase: go to where the public policy energy is.

### **A Unifying Vision: New 10-year goals to foster collaboration, transformation, and systems alignment**

In 2014 the Commissioners who developed the report of the Commission on Building Our New Economy (the ONE Nova Scotia Report) put forward 17 goals to align behind to address the economic and demographic issues they perceived in 2012-2013. The reason they chose this approach was to create multi party, multi sectoral alignment to achieve a transformation they believed was then needed in Nova Scotia. They said:

“A critical characteristic of these goals is that their achievement will mean that a significant transformation has in fact been accomplished. The goals for population growth, when realized, will mean that Nova Scotia is back on track with regard to demographic and community stability. The proposed goals for business and trade expansion, research and development, labour force development and revitalization of traditional rural industries, once attained, will mean that the Nova Scotia economy has turned around and is primed for long-term and sustainable growth. And achievement of the goals for improved governance and fiscal strength will mean that our government structures at all levels are more efficient, productive and financially robust, and are all working within a common plan to build the new Nova Scotia economy.”

The ONE Nova Scotia commission highlighted goals which were relevant to Nova Scotia society in 2012 and 2013 as Nova Scotia and Canada emerged from the “Great Recession”, and they addressed economic and fiscal issues like increasing new business startups, retention and attraction of youth, workforce participation, research partnerships, immigration, trade, fisheries, agriculture, and domestic consumption of agricultural products.

Having now largely achieved the population, economic and fiscal goals, it is timely for Nova Scotians to align behind a new set of transformative social and well-

being goals, the achievement of which will mean that another significant transformation has in fact been accomplished.

As we look to the next 10 years and emerge from the global pandemic, a new set of transformative goals related to, for example, the elimination of racism, poverty, homelessness, creation of affordable housing, inclusion, biodiversity, climate action, trust in governance could be developed and, like the ONE Nova Scotia goals, their achievement will mean that a significant transformation has in fact been accomplished.

**Next Steps: Developing a Recovery Blueprint for Nova Scotia: Working with the Community Sector to set a new direction and a new “Social Contract” for Nova Scotians.**

Between 2012 and 2014 Nova Scotians were consulted on and presented with the Ivany Report which described a looming crisis attributed to low economic growth and an aging, shrinking population.

Eight year later, through collaboration and alignment behind a shared vision, with some favourable macro-economic forces and good policy the province is in a much better fiscal, economic and demographic condition, yet a sense of crisis persists—manifest in healthcare, housing, food security, racial discrimination, mental health, social isolation, and anxiety and now the displacement caused by the Covid-19 pandemic.

The Covid-19 crisis has emerged as a world changing event that has highlighted many other risks. Both within Nova Scotia, across Canada and around the developed world, there is an ongoing sense of concern, a loss of social cohesion, a risk of collapse due to the combined challenges of climate change and the social unwinding that leads to division and populism.

Within Nova Scotia, there is an opportunity to use some of the framework and approach used by the ONE Nova Scotia Commission and set us on a new, progressive path to build on recent success and ensure the next phase is one where quality of life *for all* becomes the focus of public policy.

Magnified in 2020 there has been groundswell of opposition to systemic racism and to rising inequality and shared anxiety about where these conditions could lead the world. Covid 19 has shown how isolated and exposed segments of our community are and that utilitarian thinking seeking the greatest good for the greatest number was not acceptable if the same communities were always the ones consistently left behind.

Even before Covid-19, and now, more than ever, there is a sense we are at either a precipice or a bridge of dramatic change. This process of change and how it is handled at the community level—as the appropriate unit of change--will determine our fate. Left only to the forces of chaos theory could be our undoing.

In Nova Scotia, this change can be guided by a process framed on the model of the work of the Nova Scotia Commission on Building Our New Economy formed 10 years ago. In 2022, an “Ivany Redux” --- perhaps initiated with a *Now More than Ever Report* , or similar attention getting launch, to start the process is needed.

This could commence community discussion, action, and immense cross sector collaboration which, among other things, should result in the establishment of new set of “10-year stretch goals for Nova Scotia”.

This process could be guided by a Recovery Blueprint—which has been called for by the Auditor General-- to design and build the partnerships, relationships, networks, and policy to achieve new, unifying and visionary goals for Nova Scotians over the next 10 years. There is no reason in principle why the Community Sector should not start this process. In fact, as asserted below in the context of recovery from a paradigm changing pandemic, the Community sector is best positioned to initiate this “immense collaboration”.

The most dramatic social changes in North America have been driven at the grass roots, at the community level. An organic, community led change process can have lasting impact. Like the progressive era that ended the Gilded Age and heralded dramatic shifts in policy in the 1920s and then followed the Great Depression with the “New Deal” and then the “Great Society” reforms of the 1960s, the community sector in Nova Scotia has a generational opportunity to be

a catalyst for progressive change. Like those times, social justice should no longer be a distant ideal. It should become a definite goal.

The pandemic is both a challenge and opportunity. Researchers considering the effect on community organizations of the Spanish Flu of 1918-19 concluded, "... policy planners should also consider how the pandemic impairs the social infrastructure of a community over the long term and undertake initiatives to foster the building of community organizations. After all, if it is sociable communities that survive disasters by helping themselves, investments in enhancing the social infrastructure of communities too merit consideration." (see Rao and Greve, *Disasters and Community Resilience: Spanish Flu and the Formation of Retail Cooperatives in Norway*, (Academy of Management Journal, Vol 61, No. 1. 5-25)

As was done with the ONE Nova Scotia vision, the ambition should be unifying so it can be adopted by any political party and be broadly supported.

Likewise, the goals should be such that they can attract broad based support; for example, reducing poverty levels below a set percentage in all functional economic regions of Nova Scotia, achieving a targeted digital accessibility goal (both affordable access and skill, capacity, and hardware), increasing levels of trust in government to a target percentage of the population, achieving a specified level of population growth, and achieving targets for affordable housing. Likewise, elimination of homelessness, improving food security and increasing domestic consumption of Nova Scotia based agriculture could be established as measurable goals. Existing or new environmental goals could also be brought within scope.

Like the Ivany Report, which was commenced 10 years ago, the Recovery Blueprint could be presented as a *projet nationale* that can only be achieved through immense collaboration among many segments and sectors of Nova Scotian society. It would also be a clarion call for social innovation to build on the economic and demographic success of the last 10 years when Nova Scotians collaborated on economic innovation focused on building upon the entrepreneurial and innovation capacity already here in Nova Scotia, using collective impact principles.